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EXAMINER	
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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary	Application No.	Applicant(s)	
	10/751,606	RATAIN ET AL.	
	Examiner	Art Unit	
	SARAE BAUSCH	1634	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1)☒ Responsive to communication(s) filed on *02 May 2008*.

2a)☒ This action is **FINAL**. 2b)☐ This action is non-final.

3)☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4)☒ Claim(s) *1,2,4,10,12-25 and 34-36* is/are pending in the application.

4a) Of the above claim(s) *10,12-14,24 and 25* is/are withdrawn from consideration.

5)☐ Claim(s) _____ is/are allowed.

6)☒ Claim(s) *1-2, 4, 15-23, 34-36* is/are rejected.

7)☐ Claim(s) _____ is/are objected to.

8)☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9)☐ The specification is objected to by the Examiner.

10)☐ The drawing(s) filed on _____ is/are: a)☐ accepted or b)☐ objected to by the Examiner.

Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).

11)☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

12)☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).

a)☐ All b)☐ Some * c)☐ None of:

1.☐ Certified copies of the priority documents have been received.

2.☐ Certified copies of the priority documents have been received in Application No. _____.

3.☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

1) ☐ Notice of References Cited (PTO-892)
2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
3) ☒ Information Disclosure Statement(s) (PTO/SB/08) Paper No(s)/Mail Date *07/07*.
4) ☐ Interview Summary (PTO-413) Paper No(s)/Mail Date. _____.
5) ☐ Notice of Informal Patent Application
6) ☐ Other: _____.

DETAILED ACTION

1. Currently, claims 1-2, 4, 10, 12-25, and 34-36 are pending in the instant application. Claims 3, 5-9, 11, and 26-33 have been canceled. Claims 1-2, 4, 10, 12-19, 21-23, and 25 have been amended while claims 34-36 have been added. Claims 10, 12-14 and 24-25 have been withdrawn, as being drawn to a non-elected invention, as addressed in section 2 of the office action mailed 07/26/2006. This action is written in response to applicant's correspondence submitted 08/14/2007 and 05/02/2008. All the amendments and arguments have been thoroughly reviewed but were found insufficient to place the instantly examined claims in condition for allowance. The following rejections are either newly presented, as necessitated by amendment, or are reiterated from the previous office action. Any rejections not reiterated in this action have been withdrawn as necessitated by applicant's amendments to the claims. The text of those sections of Title 35, U.S. Code not included in this action can be found in a prior Office action.

This action is Final.

2. As such claims 1-2, 4, 15-23, and 34-36 are under examination. It is noted that claims 22-23 will be examined to the extent the claims read on the elected invention of –3279 polymorphism.

Sequence Rules

3. The amendment to the specification mailed 05/02/2008 has been entered. The application is in compliance with 37 CFR 1.821 to 1.825.

Oath/Declaration

4. The declaration under 37 CFR 1.132 filed 10/24/2007 is sufficient to overcome the rejection of claims 1-5, 15, 17-19, 22-23 based upon Innocenti et al, the declaration establishes that Innocenti et al. is not by another and thus is not a reference applicable under 102(a).

Withdrawn Rejections

5. The rejection of claims 1-5 and 15-23 under 35 USC 112, 1st paragraph, written description, made in section 7 of the office action mailed 07/26/2006 is withdrawn in view of the amendment to the claims.

6. The rejection of claims 1-5 and 15-23 under 35 USC 112, 2nd paragraph, made in section 9 of the office action mailed 07/26/2006 is withdrawn in view of the amendment to the claims.

7. The rejections of claims 1-5, 15, 17-19, 22-23, under 35 U.S.C. 102(a), made in section 12, page 20-21 of the previous office action mailed 07/26/2006, is withdrawn in view of the declaration submitted on 10/24/2007.

New Grounds of Rejection, Necessitated by Amendment

Claim Rejections - 35 USC § 112- Enablement

8. The following is a quotation of the first paragraph of 35 U.S.C. 112:

> The specification shall contain a written description of the invention, and of the manner and process of making and using it, in such full, clear, concise, and exact terms as to enable any person skilled in the art to which it pertains, or with which it is most nearly connected, to make and use the same and shall set forth the best mode contemplated by the inventor of carrying out his invention.

9. Claims 1-2, 4, 15-23, and 34-36 rejected under 35 U.S.C. 112, first paragraph, as failing to comply with the enablement requirement. The claim(s) contains subject matter which was not

described in the specification in such a way as to enable one skilled in the art to which it pertains, or with which it is most nearly connected, to make and/or use the invention. This rejection was previously presented in section 6 and has been rewritten to address the amendment to the claims.

Factors to be considered in determining whether a disclosure meets the enablement requirement of 35 USC 112, first paragraph, have been described by the court in *In re Wands*, 8 USPQ2d 1400 (CA FC 1988). *Wands* states at page 1404,

> "Factors to be considered in determining whether a disclosure would require undue experimentation have been summarized by the board in Ex parte Forman. They include (1) the quantity of experimentation necessary, (2) the amount of direction or guidance presented, (3) the presence or absence of working examples, (4) the nature of the invention, (5) the state of the prior art, (6) the relative skill of those in the art, (7) the predictability or unpredictability of the art, and (8) the breadth of the claims."

The nature of the invention and breadth of claims

The claims are broadly drawn to a method for evaluating risk of irinotecan toxicity as well as optimizing the dose of irinotecan by determining the presence or absence of a T or G at position -3279 in one or both UGT1A1 genes in a patient. The claims are further drawn to administering to the patient irinotecan and a second agent to reduce excretion of an active irinotecan species through the bile. The claims are further drawn to evaluating the risk of irinotecan toxicity by determining the nucleotide sequence at position –3279 is a G or T and the presence or absence of a G or T of a patient indicates a low level of UGT1A1 activity.

The claims require the correlation that the presence of either a G or a T at position -3279 as well as the absence of either a G or T at -3279 is indicative of risk of irinotecan toxicity as well as optimizing dose of irinotecan.

Guidance in the Specification

The specification asserts a method for determining the presence or absence of polymorphisms within a uridine diphosphate glucuronsyltransferase I A1 (UGT1A1) promoter and correlating these polymorphisms with toxic effects of irinotecan as well as evaluating the risk of an individual for developing irinotecan toxicity (see page 2, lines 12-18). The specification asserts a method for determining if a treatment has a propensity to adversely affect a patient or what treatment may be appropriate or inappropriate for a particular patient by correlation with UGT1A1 genetic variation (see page 5, lines 7-12). The specification asserts that significant linkage disequilibrium between a (TA) polymorphism and variants in the phenobarbital-responsive enhancer module (PBREM) or other variants within or outside the UGT1A1 gene locus indicates that patients possessing such other variants may be at risk of irinotecan toxicity (see page 5, lines 25-29).

The specification teaches that irinotecan treatment is associated with significant toxicity and the main severe toxicities of irinotecan are delayed diarrhea and myelosuppression. The specification teaches that grade 3-4 diarrhea occurred in one third of patients and was dose limiting and teaches that a three-weekly regimen is significantly lower than a weekly regimen for grade 3-4 diarrhea. The specification teaches that grade 3-4 neutropenia is experienced in 30-40% of patients experiencing both weekly and three weekly regimens (see page 4, lines 5-20). However, the specification does not teach a method of evaluating the risk of "any" irinotecan toxicity in "any" patient by detecting the presence and absence of either a G or T at position -3279 in the UGT1A1 gene.

The specification teaches that metabolism of SN-38, an active metabolite of irinotecan, via glucuronidation represents a mechanism to protect patients from the toxic effects of irinotecan and thus a reduction of SN-38 glucuronidation contributes to the probability that toxicity associated with irinotecan may be experienced in patients (see page 4, last paragraph cont'd to page 5, first paragraph), however the specification does not teach a correlation between the metabolism of SN-38 with the presence and absence of G and T at position -3279 of UGT1A1 as well as with any TA repeat in the UGT1A1 gene.

The specification asserts that patients possessing significant linkage disequilibrium between a (TA) polymorphism and variants in the PBREM or within or outside the UGT1A1 gene locus indicates that patient may be at risk of irinotecan toxicity (see page 5, lines 25-28) and the relationship between PBREM-(TA)n haplotype and glucuronidation rate of the UGT1A1 substrate of SN-38 may be used to correlate the genotype

The specification teaches that analysis of UGT1A1 genetic variation in relation to severe toxicity after different irinotecan-based regimens has been conducted in Japanese patients but a prospective evaluation in a large trial has not been preformed and the problem of identifying the effects of various promoter polymorphism combinations on expression of UGT1A1 for determination of UGT activity levels remains and improved methods for evaluating of risk of irinotecan toxicity in an individual or patient are still needed.

The specification asserts that the evaluation of the promoter polymorphism may be used to optimize the dose of irinotecan or other compounds for treatment of a patient or to reduce their toxicity (see page 7, lines 24-26), however the specification does not teach what results of evaluating the promoter polymorphism would allow for setting a dose of the compound. For

example, if a TA repeat of 5 was determined in any individual, the skilled artisan based on the teaching in the specification would not know what dosage of the compound should be administered. The specification does not provide any guidance for correlating the results of the method of the evaluating the risk of irinotecan toxicity with setting a dose of irinotecan.

While the specification demonstrates a study of genotyping 63 patients who were administered irinotecan and had 9.5% frequency of grade 4 neutropenia irinotecan toxicity (see page 59-60 and figure 4) which was found to be more common with genotype 7/7 compared to 6/7 and 6/6 (see page 60, lines 1-5); the specification does not teach a method of evaluating the risk of "any" irinotecan toxicity by analyzing the presence of any polymorphism in linkage disequilibrium with any UGT1A1 TA repeat. The specification provides no data for the association of any polymorphism, including –3279 polymorphism of UGT1A1 and the correlation of any irinotecan toxicity. The specification asserts that the relationship between UGT1A1 genotype and severity of diarrhea could not be determined due to the low frequency of sever diarrhea in patients (see page 60, lines 18-24). The specification provides inconclusive data of the (TA) polymorphism with –3279 polymorphism and the correlation of any irinotecan toxicity in any patient. For example, the teaching in the specification show that three patients had grade 3 diarrhea were one patient was 7/7 genotype while the other two patients were 6/7 and 50% of patients with a 7/7 genotype had grade 4 neotrepenia upon administration of irinotecan. The specification does not indicate how to determine which 50% of individuals with a (TA)7 with either the presence or absence of a T or G at position -3279 in the UGT1A1 gene will have a risk of irinotecan toxicity. Furthermore the specification provides no information on how to determine the dosage of irinotecan to be administered to a patient based on any

nucleotide present at position -3279 along with the (TA) repeat. Additionally, the specification provides no correlation between the presence of –3279 polymorphism and (TA) repeats in the UGT1A1 gene and irinotecan toxicity.

It is unclear from the lack of guidance in the specification how to estimate the risk of irinotecan toxicity by determining the presence and absence of either a T or G at position -3279 of UGT1A1 and the presence or absence of either T or G with any TA repeats located in the UGT1A1 gene. The specification only gives limited guidance with respect to toxicity upon administration of irinotecan and correlation with genotyping of the UGT1A1 genomic DNA and association of the TA repeats in the TATA box of the UGT1A1 promoter region. The data in the specification demonstrates that the following genotypes were associated with neutropenia grade 4: 50% of patients have the 7/7 TA genotype of UGT1A1, 12.5% of patients have the 6/7 TA repeats, and 0% of patients had 6/6 TA repeats (see page 60, lines 1-4). The specification does not demonstrate any toxicity with–3279 polymorphism, include the presence of either a T or G or the absence of a T or G of UGT1A1 gene or the polymorphism with any TA repeat of UGT1A1 gene. The specification does not teach which TA repeats is correlative to leucopenia or diarrhea, much less "any" other toxicity of administration of irinotecan. If the skilled artisan assayed an individual and found the individual to have a 7/7 repeat of UGT1A1 promoter region in linkage disequilibrium with –3279 polymorphism, how would the skilled artisan know if the individual would have the risk of developing toxicity to irinotecan? How would the skilled artisan know much of irinotecan to administer to the patient? The specification does not teach a predictive correlation with variants of UGT1A1 and administration of irinotecan. Furthermore, the

specification does not teach any association of position -3279 alone or with a variant of TA repeats of UGT1A1 with "any" toxicity.

The specification does not provide any guidance with which genotype is predictably correlative to leucopenia, neotropenia, or diarrhea, much less "any" toxicity of irinotecan, for example did the volunteers have any other side effects conditions (nausea, headache, malaise, loss of appetite, etc) that would affect estimating the risk of toxicity and possibly affect the correlation with genotype of UGT1A1? Based on the teachings in the specification, it is unclear how the analysis of TA repeats in UGT1A1 gene and position -3279 correlates to evaluating the risk of "any" irinotecan toxicity or how to determine the dosage of compound to administer based upon the variant present.

The specification envisions hypothetical situations where the presence of a variant of UGT1A1 gene in linkage disequilibrium with any TA repeats could be used to determine "any" toxicity of administration of irinotecan, and the results further be used to determine the dosage of irinotecan. The specification appears to be conceiving of possible scenarios where the genotype of the UGT1A1 gene of an individual could be used to determine a risk of toxicity and that these results could indicate amount of dosage of irinotecan, however, it is unclear how one of skill in the art would correlate the presence of a specific genotype with toxicity of irinotecan or how one of skill in the art would determine the dosage of irinotecan based on the genotype present in an individual and the limited guidance in the specification and the prior art.

Working Examples

The specification demonstrates a study of genotyping 83 human livers which comprised 68% Caucasians, 18% African-Americans, 1% Asians and 2% others (see example 1, page 44-

48) and genotyping and determining the linkage disequilibrium of 103 samples for (TA) polymorphism and the PBREM region of UGT1A1 (see example 2-4, pages 49-52). The specification demonstrates a working example of genotyping 63 patients that were administered irinotecan (see example 7, pages 59-62) by analysis of TA repeats in the TATA box of UGT1A1 and presence of –3279T and –3156A of UGT1A1 gene (see page 59, lines 20-27). The specification demonstrates the toxicity of diarrhea and neutropenia was analyzed and demonstrate that 9.5% of patients had grade 4 neutropenia (page 59, line 30), 5% patients had grade 3 diarrhea and no patients had grade 4 diarrhea (see page 60, lines 18-24). The specification teaches that the low frequency of severe diarrhea did not allow any formal statistical analysis and teach that 50% of patients had genotype 7/7, 12.5% had 6/7 and 0% had 6/6 genotype with grade 4 neutropenia (see page 60, lines 1-4). The specification teaches analysis of –3156G>A variant with TA7 individuals and neutropenia (see page 60, lines 5-17), however the specification does not teach any analysis of –3279T with any toxicity. The specification does not teach the analysis of -3279G with any toxicity. The specification does not teach any analysis with the absence of -3279G or the absence of -3279T with irinotecan toxicity. The specification does not teach which genotype of UGT1A1 predictably correlates to an setting of a dosage such that the skilled artisan would be able to predictably correlate the results of genotyping study to determine if irinotecan would give any toxicity or determine the dosage of the compound to be administered.

Level of Skill in the Art

The level of skill in the art is deemed to be high.

The unpredictability of the art and the state of the prior art

The prior art teaches that there are many parameters that need to be evaluated prior to using polymorphism and gene expression as a test to determine if "any" toxicity of irinotecan administered to a patient will occur. Furthermore, the prior art teaches that the parameters that need to be addressed in order to conduct a study on correlating polymorphisms in gene expression yield gaps in information that are needed to complete a thorough screening of gene expression effects.

Post filing art, Kroese et al. (Genetics in Medicine, vol 6 (2004), p. 475-480) teach genetic tests are heterogeneous in nature and the exact characteristics of a particular genetic test to be evaluated must be tightly defined. Kroese et al. teach that a particular genetic condition may be caused by more than one gene and these variations may be due to deletions and insertions not detected by routine sequence methods. (see page 476, 2nd column, last paragraph). Kroese et al. teach that genetic test is shorthand to describe a test to detect a particular genetic variant for a particular disease in a particular population and for a particular purpose and that it should not be assumed that once the characteristics of a genetic test are evaluated for one of these reasons that the evaluation will hold or be useful for other purposes and all measures of the test performance should be presented with their 95% confidence intervals (see page 477, 1st column, 1st and 2nd full paragraph). Kroese et al. teach that the limitations of our genetic knowledge and technical abilities means that for the moment there are likely to be gaps in the information needed to complete a thorough evaluation of many genetic tests (see page 479, 2nd column, last paragraph). Additional post filing art reveals that most gene association studies are typically wrong. Lucentini (The Scientist, 2004, Vol 18, page 20) teach that it strikingly

common for follow-up studies to find gene-disease associations wrong (see page 2, 1st paragraph). Lucentini teaches that two recent studies found that typically when a finding is first published linking a given gene to a complex disease there is only roughly a one-third chance that the study will reliably confirm the finding (see page 2, 3rd paragraph). Lucentini teaches that bigger sample sizes and more family-based studies, along with revising statistical method, should be included in the gene association studies (see page 3, 2nd paragraph).

Applicant's own post filing art, (Innocenti et al, J. Clin. Onc. 2004 22(8):1382-1388), teach that a study of 66 patients was not a precise assessment of the sensitivity of the TA indel diagnostic test (see page 1386, 2nd column, 2nd full paragraph) and teach that a precise assessment of the sensitivity of TA indel diagnostic test would require a larger number of patients, as also indicated by the quite wide 95% CI of the test parameters (results are similar to data presented in the instant specification) (see page 1386, 2nd column, 2nd full paragraph). Innocenti et al. teach that –3279G>T variant was not associated with bilirubin when TG6/TG6 were compared to TG6/GC6 and when TG6/GA7 patients were compared with GG6/GA7 patients (see page 1385, 2nd column, 1st paragraph). Additionally, applicant's own post filing art, (Innocenti et al. Pharmacogenetics and Genomics 2005, 15:295-301) describe common haplotypes in the UGT1A1 gene and highlight the important ethnic differences in the composition between Asians and Caucasians (see page 300, 1st column, 1st full paragraph). Innocenti et al. teach that future studies are planned to evaluate the linkage disequilibrium in large collection of samples of African origin and if the functional effect of UGT1A1 haplotype will be confirmed in further preclinical studies the phenotypic consequence of these haplotypes on the pharmacokinetics and pharmacodynamis of substrates of UGT1A1 should be evaluated

(see page 300, 1st column last sent. Con't to 2nd column). Applicants own post filing art teach that the haplotype of the UGT1A1, including –3279G>T and TA repeats, is different among Caucasian and Asians and further studies are needed to evaluate the haplotypes present in other races, as well as for correlation of haplotypes and drug interactions.

Furthermore, Applicants own art, (Innocenti et al., Pharmcogenetics, 2002, 12:725-733) teach linkage disequilibrium in Caucasians was highly significant between –3278 and the (TA) polymorphism (see abstract). Innocenti et al. teach that the haplotype is different between Caucasians and African-Americas (see abstract). Innocenti et al. teach that no statistical difference was observed when SN-38 glucuronidation rates were compared between –3279 haplotypes and the functional significance of the –3279G>T requires further testing (see page 731, 2nd column, 1st paragraph). Innocenti et al. teach that haplotypic structure of the UGT1A1 promoter is likely to vary in different ethnicities (see page 732, 1st column, 1st full paragraph). Innocenti et al. teach that finding a haplotype-pheotype correlation is hampered by the limited sample size of haplotype pairs for each (TA) genotype, as well as environmental variables that affect UGT1A1 expression, such as smoking habit, alcohol intake, previous medications and such factors might have a negative impact on association studies with limited sample size (see page 732, 2nd column, 1st full paragraph). The sample size presented in Innocenti et al. (2002) is the same sample size disclosed in the instant specification and as such, the limited sample size coupled with environmental variables, as taught by Innocenti et al. is unpredictable in correlating the haplotype of any patient with irinotecan toxicity (phenotype).

Based on the data presented in the specification and the prior art teachings, it is unpredictable to correlate genotyping of any patient based on presence of the number of TA

repeats in the promoter region and any polymorphism of the UGT1A1 gene, including –3279G>T to evaluate the risk of any irinotecan toxicity or determine the dosage to be administered of irinotecan.

Quantity of Experimentation

Given the lack of guidance in the specification with regard to correlation of presence of either a T or G or the absence of either a T or a G at position -3279 of UGT1A1 with or without any TA repeat to "any" toxicity of irinotecan and the lack of guidance with regard to correlating the variant of UGT1A1 gene to the dosage of irinotecan the quantity of experimentation in this area is extremely large. The skilled artisan would have to determine a predictable correlation between variants of UGT1A1 gene at position -3279 that would result in "any" adverse side effect (toxicity) by the administration of irinotecan before attempting to determine the amount of dosage of the compound. To practice the invention as broadly as it is claimed, the skilled artisan would have to determine which genotype is present upon administration of irinotecan in all patients (human, dog, cat, etc.) and which genotype is associated with "any" side effect – which encompasses more than neotrepenia, diarrhea and leucopenia, for example it could include headaches, mild nausea, or the efficacy of the drug. The skilled artisan would have to perform an extremely large amount of trial and error analysis in a large study to determine if the presence and absence of a T and G at position -3279 in UGT1A1 along with the presence of the TA repeats and this is in fact detecting adverse side effect due to administration of irinotecan and is associated with the dosage of the compound. There is still a significant amount of unpredictably in identifying genes and within the human gene, a skilled artisan would have to perform a large exhaustive assay to test for genotypes in a large study pool, including a multi-ethnic study, as

taught by Innocenti et al. to determine if the genotypes identify adverse side effects due to administration of a compound and then determine how to determine the dosage based on the genotype present. This would require a large amount of inventive effort, with each of the many intervening steps, upon effective reduction to practice, not providing any guarantee of success in the succeeding steps. Thus given the broad claims in an art whose nature is identified as unpredictable, the lack of guidance on how to predictably correlate variants of the UGT1A1 gene to estimating the risk of "any" toxicity by administration of irinotecan and then further determining the dosage of irinotecan, the large quantity of research required to define the lack of guidance provided in the specification, the absence of working examples, and the negative teaching in the prior art balanced only against the high level of skill in the art, it is the position of the examiner that it would require undue experimentation for one of skill in the art to make the claimed invention.

Response to Arguments

10. The response traverse the rejection on pages 6-11 of the remarks mailed 01/26/2007. The response asserts that claims have been amended to recite the -3279 polymorphism. It is noted that claims recite the presence or absence of either the T or G at position -3279 and thus the claims require the correlation that both the wild type as well as the polymorphic variant at position -3279 are indicative of irinotecan toxicity. The specification does not teach nor provide guidance for the skilled artisan to determine that both the wild type and variants at position -3279 are both predictability correlative to irinotecan toxicity in a patient, human as well as non-human.

The response asserts that the claims merely require that some toxicity risk is assessed and that the claims do not require a correlation with a specific genotype and specific toxicities. The response further asserts that the claims do not require identification of an individual who must develop toxicity but rather evaluating risk. It is noted that the examiner was not asserting that the claims require a specific toxicity is associated with a specific genotype or that the claims require identification of an individual to develop toxicity however the claims broadly encompass any type of toxicity which is correlated to either the presence or absence of a T or G at position -3279 and thus the breadth of the claims require that there is a predictable correlation between any level of toxicity in a patient with a specific genotype and the specification does not predictably correlate a mild, moderate, or severe toxicity response (as the claims read on any of these toxicity responses) with a T or G present or absent at position -3279 of UGT1A1.

The response asserts that the claims require that only the dosage be adjusted up or down depending on the relative risk of toxicity and that the specification discloses that the amount of

glucuronidation of irinotecan is different depending upon whether at T or a G is present at position -3279. The response points to table 3 and 8 as well as paragraph 198 and 223 (of the published application) to disclose the amount of glucuronidation of irinotecan. However neither paragraphs nor table 3 relate to the amount of glucuronidation of irinotecan based on the -3279 polymorphism. Specifically, table 3 relates to the frequency of the haplotype of the TA repeat with the -3279 however table 3 does not evaluate -3279 polymorphism alone or with the TA repeat with amount of glucuronidation. Additionally, table 8 relates to the predictive model of the -3156 genotype not -3279 genotype (see paragraph 233 and table 8). Thus the specification does not correlate the polymorphism of -3279 alone or with TA repeat with amount of glucuronidation of irinotecan.

The response asserts that the examiner challenges the reliability of genetic analyses. The response asserts that Ando discloses that using UGT1A1 genetic testing is uniquely predictive and should continue. The response asserts that several post filing date references demonstrate the enablement of the pending claims. The response asserts that Kitagawa confirm a correlation between -3279 and irinotecan toxicity. This response has been thoroughly reviewed but not found persuasive. The references cited by the response do not demonstrate what one skilled in the art knew at the time of filing the application nor do these references demonstrate that the disclosure as filed would have enabled the claimed invention for one skilled in the art at the time of filing. It is noted that the specification must be enabling as of the filing date (see MPEP 2164.05) Additionally, Kitagawa as well as Maruo, Girard, and Ferraris, cited by applicant demonstrate that -3279 G polymorphism alone is not predictive of irinotecan toxicity as each of these citations evaluate -3279G and (TA) repeats. Additionally, none of the cited references

demonstrate the presence of a T or the absence of a G or a T (but any other nucleotide present) is indicative of irinotecan toxicity. Additionally, Ferraris merely demonstrates that -3279 G and (TA)7 genotype is associated with hyperbilirubinemia but does not demonstrate irinotecan toxicity.

The response asserts that the evidence as a whole does indicate a relationship between -3279 and irinotecan toxicity. This response has been thoroughly reviewed but not found persuasive. As stated above, the specification must be enabling as of the filing date and thus the guidance in the specification coupled with the post filing art demonstrate that -3279 G alone is not predicative of irinotecan toxicity. Additionally, the claims recite that either a G or a T be present or absent and this presence or absence at position -3279 is indicative of irinotecan toxicity. Neither the art nor the specification demonstrate that the absence of either a G and a T or the presence of a T at position -3279 alone is indicative of irinotecan toxicity.

The response asserts that Kigawa showed an effect of -3279G associated with increased irinotecan toxicity and reduced SN-38G/SN-38 ratios in Japanese patients along the magnitude of the effect is small and effect was not reported. The response asserts that Sugatani, Ki, and Ferraris showed an effect of bilirubin of the G allele. The response asserts that each of these citations are characterized in a study of human population and thus the significance is high and therefore the skilled artisan would most certainly adopt the conclusion of the applicants citations given the greater vitality of the data. This response has been thoroughly reviewed but not found persuasive. Initially the claims require that both the presence and absence of the G or T allele of -3279 is predictive of irinotecan toxicity, thus the claims as written indicate that both the wild type as well as the G allele will be associated with irinotecan toxicity. None of the references

provided for by applicant indicate that the presence of a T and presence of a G or absence of a G or absence of a T at position -3279 will be predicative or irinotecan toxicity. Additionally, Ki and Ferraris do not evaluate the toxicity of irinotecan thus the significance of these references is not high and the conclusion of applicants would not have been drawn from the cited references.

The response asserts that -3279 is probably useful in predicting irinotecan toxicity in at least Asian populations. This response has been thoroughly reviewed but not found persuasive. The claims are not limited to Asian populations nor do claims require a screening assay to determine if the -3279 polymorphism is useful in predicting irinotecan. The claims require that there is a predicative correlation between the -3279 allele and any patient population, human as well as non-human. The claims recite any patient with irinotecan toxicity and the presence or absence of either a G or T at position -3279 is indicative of irinotecan toxicity thus the claims as written are not enabled as neither the specification nor the art teach that both the wild type as well as the G allele at position -3279 alone of the UGT1A1 is predictive in any patient (human or non-human, Asian, Caucasian, etc) for irinotecan toxicity.

For these reasons, and the reasons made of record in the previous office actions, the rejection is maintained.

Claim Rejections - 35 USC § 102

11. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

> A person shall be entitled to a patent unless –
>
> (b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.
>
> (e) the invention was described in (1) an application for patent, published under section 122(b), by another filed in the United States before the invention by the applicant for patent or (2) a patent granted on an application for

patent by another filed in the United States before the invention by the applicant for patent, except that an international application filed under the treaty defined in section 351(a) shall have the effects for purposes of this subsection of an application filed in the United States only if the international application designated the United States and was published under Article 21(2) of such treaty in the English language.

12. Claims 1-2, 4, 15-23 and 34-36 are rejected under 35 U.S.C. 102(e) as being anticipated by Hasegawa et al. (US 2004/0058363, filing date 12/12/2000). This rejection was previously presented and has been rewritten to address the amendment to the claims.

With regard to claim 1-2, 4, 22-23, 34-36 Hasegawa et al. teach genotyping the TATA box of UGT1A1 gene promoter region and codon 71 and 229 of the UGT1A1 gene (see paragraph 98-103). Hasegawa et al. teach an association of the number of TA repeats (5-8, claim 4) and polymorphism in codon 71 and 229 and irinotecan toxicity (see paragraph 123-125, 131). Thus Hasegawa et al. teach that the absence of a G at position -3279 is indicative of irinotecan toxicity.

With regard to claim 15, Hasegawa et al. further teach analyzing the bilirubin levels of the patients (glucuronidation rate) (see paragraph 121).

With regard to claim 16, Hasegawa et al. teach lowering the actual amount of irinotecan in patients (optimizing a dose of irinotecan) (see paragraph 121 and 134).

With regard to claim 17-19, Hasegawa et al. teach PCR amplification of the variant sequence of the promoter region of the UGT1A1 gene and determining the number of TA repeats (hybridization assay, allele specific amplification assay). Hasegawa et al. teach sequencing the PCR product (claim 18) (see paragraph 123-125 and paragraph 59-60).

With regard to claim 20-21, Hasegawa et al. teach administration of irinotecan to patients and loperaminde to patients suffering from severe toxicity (second agent) (see paragraph 96).

Response to Arguments

13. The response traverse the rejection on pages 15 of the remarks mailed 01/26/2007. The response asserts that claim 1 has been amended to incorporate the limitations of claim 5 which was not rejected. It is noted that claim 5 required the presence of the specific G allele at position -3279. The claims as amended do not require that the nucleotide at position -3279 is a G the claims merely require the presence or absence of a T or G at position -3279, thus Hasegawa anticipates the claims as Hasegawa teaches a T or the absence of a G at position -3279.

14. Claims 1-2, 4, 15-23 and 34-36 are rejected under 35 U.S.C. 102(b) as being anticipated by Ando et al. (Cancer Research 2000 60:6921-6926). This rejection was previously presented and rewritten to address the amendment to the claims.

With regard to claim 1-2, 4, 20-21, Ando et al. teach genotyping the TATA box of UGT1A1 gene promoter region and codon 71 and 229 of the UGT1A1 gene (see table 5, page 6924). Ando et al. teach an association of the number of TA repeats (5-8, claim 4) and polymorphism in codon 71 and 229 and irinotecan toxicity (see page 6923, 2nd column, 2nd full paragraph). Ando et al. teach the presence of a T and the absence of a G at position -3279 thus Ando et al. anticipates the claimed invention.

With regard to claim 15, Ando et al. further teach analyzing the bilirubin levels of the patients (glucuronidation rate) (see page 6923, 2nd column, last paragraph).

With regard to claim 16, Ando et al. teach lowering the actual amount of irinotecan in patients (optimizing a dose of irinotecan) (see page 6923, 1st column, 1st paragraph).

With regard to claim 17-19, Ando et al. teach PCR amplification of the variant sequence of the promoter region of the UGT1A1 gene and determining the number of TA repeats

(hybridization assay, allele specific amplification assay). Ando et al. teach sequencing the PCR product (claim 18) (see page 6922, genotyping).

With regard to claim 20-21, Ando et al. teach administration of irinotecan to patients and loperaminde to patients suffering from severe toxicity (second agent) (see table 3, page 6923, 2nd column, 1st full paragraph).

Response to Arguments

15. The response does not address the rejection in the remarks mailed 01/26/2007 and as such the rejection is maintained.

Conclusion

16. No claims allowable.

17. Applicant's amendment necessitated the new ground(s) of rejection presented in this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. See MPEP § 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the date of this final action.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to SARAE BAUSCH whose telephone number is (571)272-2912. The examiner can normally be reached on M-F 9am-5pm.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Ram Shukla can be reached on (571) 272-0735. The fax phone number for the organization where this application or proceeding is assigned is (571) 273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at (866) 217-9197 (toll-free).

Any inquiry of a general nature or relating to the status of this application or proceeding should be directed to (571) 272-0547.

Patent applicants with problems or questions regarding electronic images that can be viewed in the Patent Application Information Retrieval system (PAIR) can now contact the USPTO's Patent Electronic Business Center (Patent EBC) for assistance. Representatives are available to answer your questions daily from 6 am to midnight (EST). The toll free number is (866) 217-9197. When calling please have your application serial or patent number, the type of document you are having an image problem with, the number of pages and the specific nature of the problem. The Patent Electronic Business Center will notify applicants of the resolution of the problem within 5-7 business days. Applicants can also check PAIR to confirm that the problem has been corrected. The USPTO's Patent Electronic Business Center is a complete service center supporting all patent business on the Internet. The USPTO's PAIR system provides Internet-based access to patent application status and history information. It also enables applicants to view the scanned images of their own application file folder(s) as well as general patent information available to the public.

For all other customer support, please call the USPTO Call Center (UCC) at 800-786-9199.

/Sarae Bausch/
Examiner, Art Unit 1634